

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>James</i>		<i>05-31-01</i>
O.I.P.E. CLASSIFIER		<i>43</i>	<i>6/11/01</i>
FORMALITY REVIEW	<i>R.H.</i>	<i>1085</i>	<i>5-15-01</i>
RESPONSE FORMALITY REVIEW	<i>MD</i>	<i>Jan</i>	<i>Jan</i>

09/866781

INDEX OF CLAIMS

Rejected N Non-elected
 Allowed I Interference
 (Through numeral) Canceled A Appeal
 Restricted O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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10/16/01
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